

### CMS Program Data - Populations<sup>1</sup>

Medicare (avg monthly)	CY 2019	CY 2020	CY 2021 <sup>2</sup>
Parts A and/or B	61.5	62.8	63.8
Aged	53.0	54.5	55.8
Disabled	8.5	8.3	8.0
Original Medicare Enrollment	38.6	37.8	36.3
MA & Other Health Plan Enrollment	22.9	25.1	27.5
MA Enrollment	22.2	24.4	26.9
Part D (MAPD+PDP)	45.8	47.4	48.7

Medicaid (avg monthly) <sup>3</sup>	FY 2019	FY 2020	FY 2021
Total	73.9	75.3	83.5
Aged	6.1	6.3	6.5
Blind/Disabled	10.2	10.1	10.2
Children	28.9	29.1	33.5
Adults	15.2	15.4	17.0
Expansion Adult	12.1	12.8	15.0

CHIP (avg monthly) <sup>3</sup>	7.2	7.1	7.1
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<sup>1</sup> Populations are in millions and may not add due to rounding

<sup>2</sup> Preliminary and subject to change

<sup>3</sup> Projected estimates

MA - Medicare Advantage  
MA PD - Medicare Advantage Prescription Drug Plan  
PDP - Prescription Drug Plan  
CHIP - Children's Health Insurance Program

SOURCES: CMS/Office of Enterprise Data & Analytics/Office of the Actuary

### Medicare Deductibles, Coinsurance, Premiums

	CY 2021	CY 2022
<b>Part A</b>		
Inpatient Hospital		
Deductible	\$1,484.00	\$1,556.00
Coinsurance/Day	\$371.00	\$389.00
Coinsurance/LTR Day	\$742.00	\$778.00
Coinsurance/SNF Day	\$185.50	\$194.50
<b>Part B</b>		
Deductible	\$203.00	\$233.00
<b>Part D</b>		
Maximum Deductible	\$445.00	\$480.00
Initial Coverage Limit	\$4,130.00	\$4,430.00
Out-of-Pocket Threshold	\$6,550.00	\$7,050.00
<b>Premiums</b>		
Part A	\$471.00	\$499.00
Part B	\$148.50-\$504.90	\$170.10-\$578.30

NOTE: The inpatient hospital deductible applies per benefit period.

LTR - Life Time Reserve  
SNF - Skilled Nursing Facility

SOURCE: CMS/Office of the Actuary

**Original Medicare Persons Served and Payments by Type of Service**  
**Calendar Year 2020**

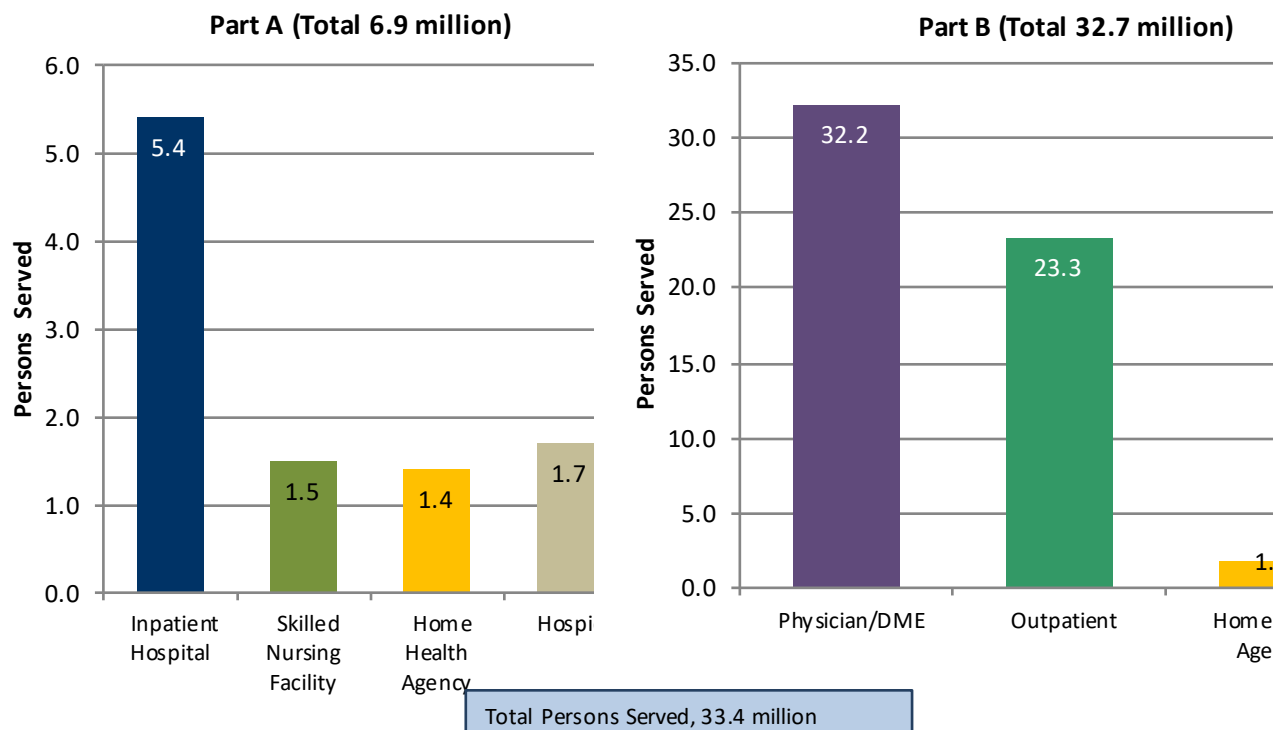
	<b>Persons Served</b> <b>(in millions)</b>	<b>Program Payments</b> <b>(in billions)</b>
<b>Total</b>	<b>33.4</b>	<b>\$379.6</b>
<b>Part A</b>	<b>6.9</b>	<b>\$187.4</b>
Inpatient Hospital	5.4	\$130.2
Skilled Nursing Facility	1.5	\$28.6
Home Health Agency	1.4	\$6.3
Hospice	1.7	\$22.4
<b>Part B</b>	<b>32.7</b>	<b>\$192.2</b>
Physician/DME	32.2	\$106.5
Outpatient	23.3	\$74.8
Home Health Agency	1.8	\$10.8

Total = Parts A and/or B

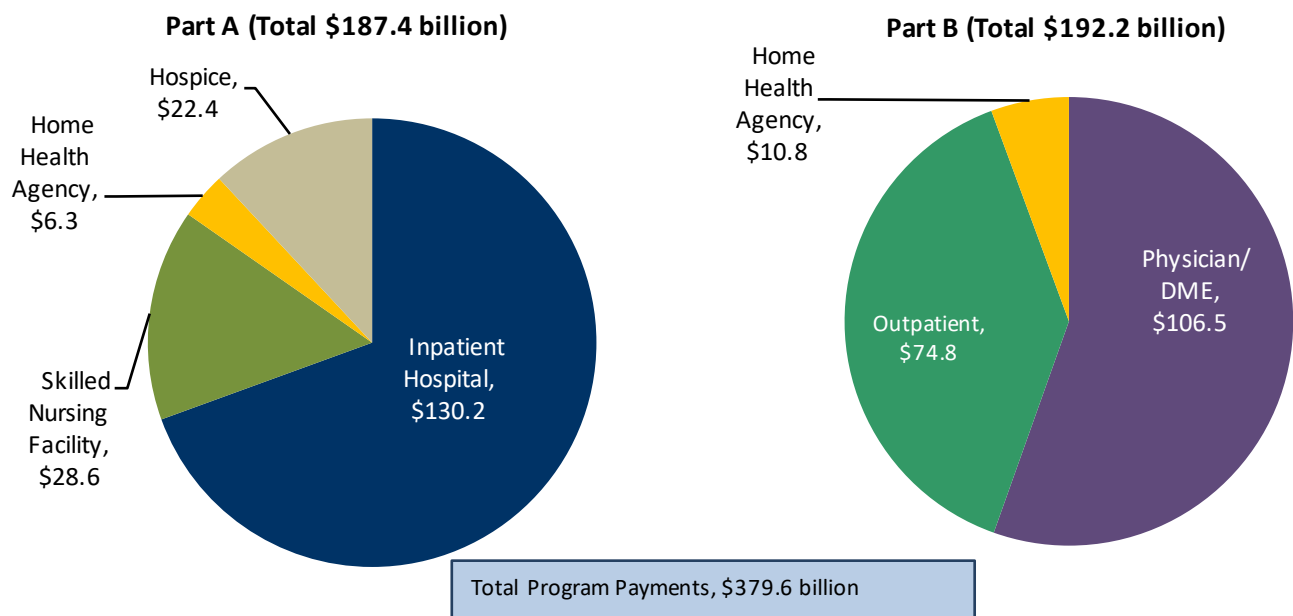
DME - Durable Medical Equipment

SOURCE: CMS/Office of Enterprise Data & Analytics

**Original Medicare Persons Served (in Millions) by Type of Service  
 Calendar Year 2020**



**Original Medicare Program Payments (in Billions) by Type of Service  
 Calendar Year 2020**



Total = Parts A and/or B

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SOURCE: CMS/Office of Enterprise Data & Analytics

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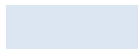
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**Medicare Part D Utilization and Expenditures**  
**Calendar Year 2020**

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<b>Utilizing Beneficiaries, in millions</b>	<b>46.2</b>
Prescription Drug Events, in billions	1.5
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<b>Total Part D Expenditures, in billions</b>	<b>\$105.8</b>
Part D Benefit Payments	\$104.6
Part D Administrative Expenses	\$0.4

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SOURCES: CMS/Office of Enterprise Data & Analytics/Office of the Actuary



**Medicaid Beneficiaries and Payments by Selected Type of Service**  
**Fiscal Year 2014**

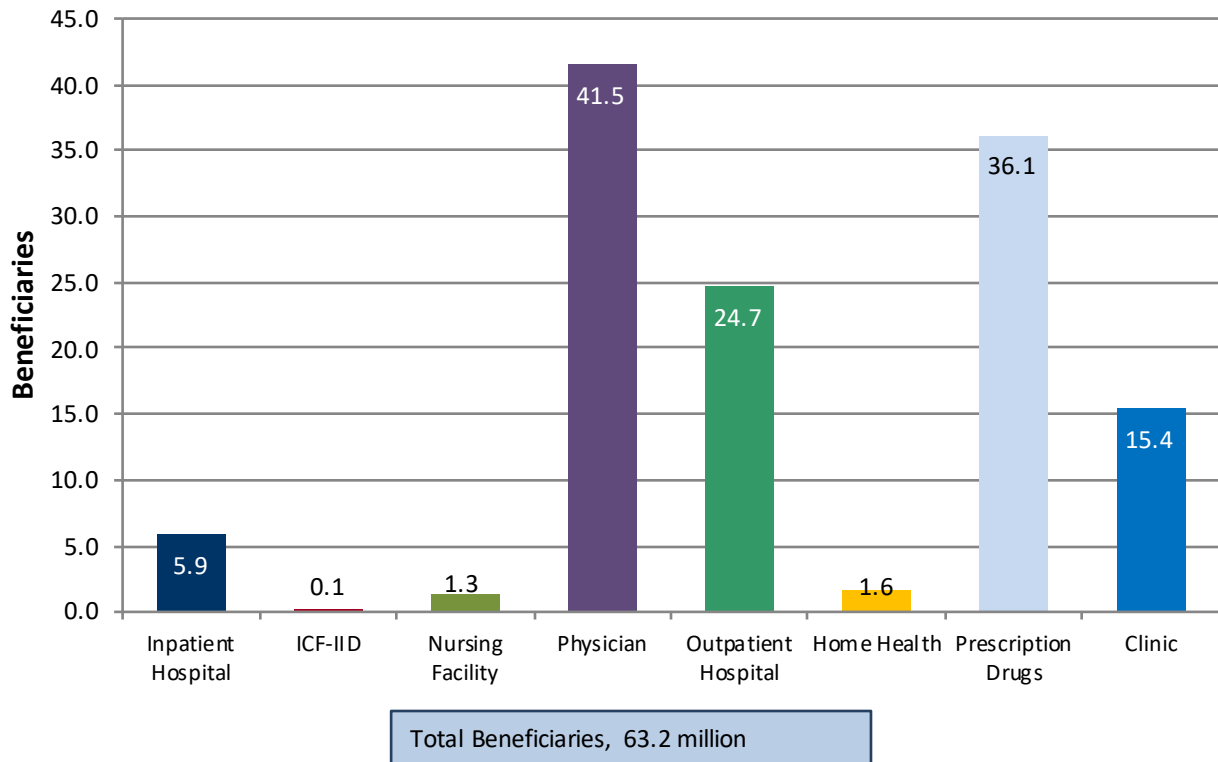
	<b>Beneficiaries (in millions)</b>	<b>Payments (in billions)</b>
<b>All Services</b>	<b>63.2</b>	<b>\$314.5</b>
Inpatient Hospital	5.9	\$22.6
ICF-IID	0.1	\$7.9
Nursing Facility	1.3	\$37.0
Physician	41.5	\$6.9
Outpatient Hospital	24.7	\$9.3
Home Health	1.6	\$4.8
Prescription Drugs	36.1	\$14.9
Capitation	--	\$138.7
Clinic	15.4	\$11.0
Personal Care	1.1	\$9.9
Other Services	--	\$51.6

NOTES: Beneficiaries represent unique individuals on whose behalf Medicaid payments for the indicated services were made during the fiscal year (FY). Excludes enrollees in separate Title XXI Children's Health Insurance Programs. Excludes data for Alaska, Colorado, Florida, Kansas, North Carolina, and Rhode Island and contains partial data for District of Columbia, Delaware, Illinois, Kentucky, Maryland, Maine, Montana, North Dakota, New Hampshire, Nebraska, New Mexico, Nevada, South Carolina, Texas, Virginia, and Wisconsin. These statistics are lower for FY 2014 than those previously reported for FY 2013 and are primarily a result of incomplete data. MSIS data are incomplete for FY 2014, as noted above. The number of beneficiaries reported as receiving home health services was 1.6 million in FY 2014 compared to 17.3 million reported previously for FY 2013. The FY 2013 data were probably an anomaly based on coding problems in one or more states.

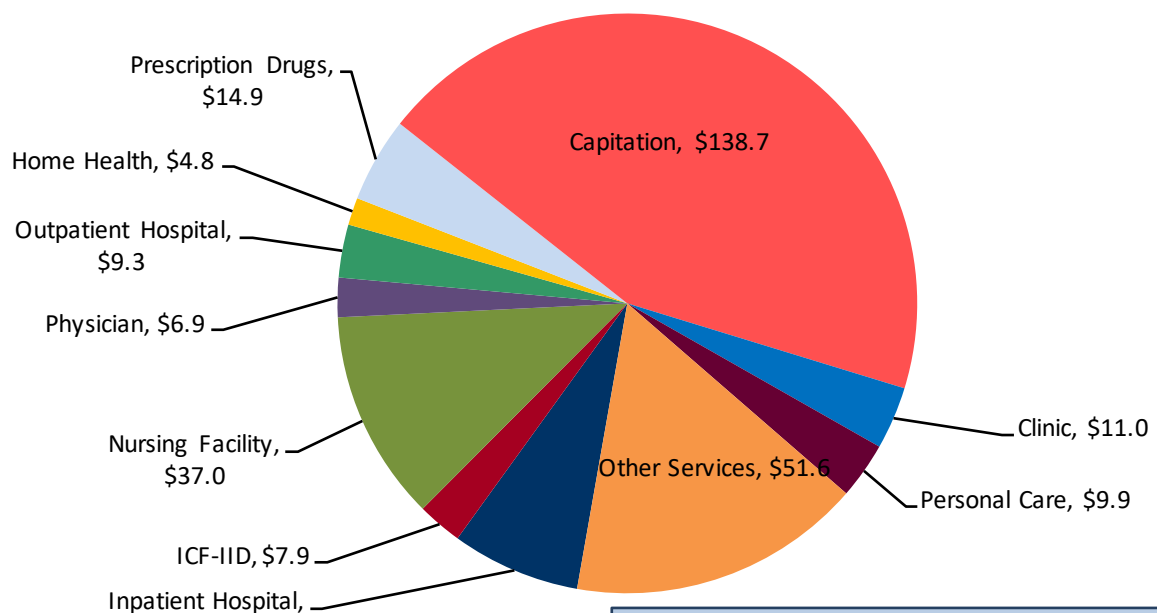
ICF-IID - Intermediate Care Facility for Individuals with Intellectual Disabilities.

SOURCE: CMS/Center for Medicaid and CHIP Services

**Medicaid Beneficiaries (in Millions) by Type of Service**  
**Fiscal Year 2014**



**Medicaid Payments (in Billions) by Type of Service**  
**Fiscal Year 2014**

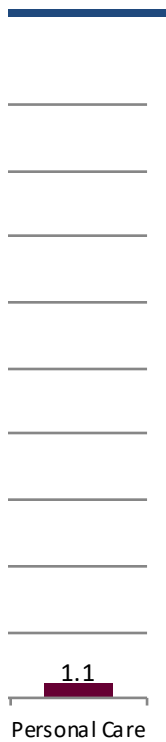


\$22.6

Total Medicaid Payments, \$314.5 billion

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SOURCE: CMS/Center for Medicaid and CHIP Services



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**Medicare Institutional Providers Calendar Year 2020**

<b>Type of Provider</b>	<b>Count</b>
Total Hospitals	6,214
Short Stay	3,481
Psychiatric	613
Rehabilitation	314
Children's	93
Long Term	347
Critical Access	1,351
Religious Non-Medical	15
Home Health Agencies	11,221
Skilled Nursing Facilities	15,015
Labs	284,414
Outpatient PT/Speech Pathology	2,044
Rural Health Clinics	4,736
Federally Qualified Health Centers	10,000
Ambulatory Surgical Centers	5,905
Comprehensive Outpatient Rehab Facilities	158
Hospices	5,260

PT - Physical Therapy

SOURCE: CMS/Office of Enterprise Data & Analytics

**Medicare Non-Institutional Providers by Specialty<sup>4</sup>**  
**Calendar Year 2020**

Specialty Type	Count
Total Providers	1,403,879
Primary Care	223,298
Medical Specialties	176,699
Surgical Specialties	111,695
Emergency Medicine	50,357
Anesthesiology	43,339
Radiology	39,738
Obstetrics-Gynecology	35,278
Psychiatry	27,856
Pathology	12,572
Non-Physician Practitioners	515,001
Limited Licensed Practitioners	104,337
Ambulance Service Supplier	10,213
Opioid Treatment Programs	920
All Other Providers	76,821

<sup>4</sup> Providers utilized by Original Medicare beneficiaries for all Part B non-institutional provider services. Providers may be counted in more than one specialty classification but are reported as a single provider in the "Total Providers" count.

SOURCE: CMS/Office of Enterprise Data & Analytics

**Medicare Durable Medical Equipment, Prosthetics, Orthotics  
and Supplies (DMEPOS) Providers by Specialty**  
**Calendar Year 2020<sup>5</sup>**

<b>Specialty Type</b>	<b>Count</b>
Total DMEPOS Providers	79,299
Pharmacy	47,017
Medical Supply Company	9,363
Podiatry	4,900
Optometry	4,228
Individual Certified Prosthetist/Orthotist	2,493
Orthopedic Surgery	2,019
General Practice	1,585
Optician	1,256
Ophthalmology	1,193
All Other DMEPOS Providers	5,500

<sup>5</sup> Providers utilized by Original Medicare beneficiaries for all Part B non-institutional DMEPOS services. Providers may be counted in more than one specialty classification but are reported as a single provider in the "Total DMEPOS Providers" count.

SOURCE: CMS/Office of Enterprise Data & Analytics



### Medicare Prepaid Contracts (01/2022)

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	Count
Total Prepaid Plans (MA and others)	937
Total Prescription Drug Plans	62

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SOURCE: CMS/Center for Medicare

### National Health Expenditures Calendar Year 2020

Total	\$4,124.0
% of GDP	19.7%
Per Capita	\$12,530
Health Insurance	\$2,809.3
Private Health Insurance	\$1,151.4
Medicare	\$829.5
Medicaid (Title XIX)	\$671.2
CHIP (Title XIX & XXI)	\$21.3
Department of Defense	\$43.8
Department of Veterans Affairs	\$92.2

Dollars in billions except for Per Capita.

SOURCE: CMS/Office of the Actuary

### CMS Financial Data Fiscal Year 2021

Total Federal Program Spending (\$ in billions)	\$1,463.4
Medicare Benefits <sup>6</sup>	\$903.0
Total Medicaid <sup>7</sup>	\$532.1
CHIP	\$16.1
Other Spending	\$12.1
Total Program Management (\$ in millions)	\$7,015.0
Total Appropriation	\$4,478.0
Other Sources	\$2,537.0
Total Health Care Fraud & Abuse Control Funding (\$ in millions)	\$2,222.4
FTE Employment	6,287

<sup>6</sup> Medicare Benefits, including Health Information Technology Incentive Payments.

<sup>7</sup> Amount reported as total gross outlays including the Vaccines for Children Program.

SOURCE: CMS/Office of Financial Management